Trip Report: Improving Quantification of ARVs Workshop Windhoek, Namibia, 19-22 July, 2005

Jennifer McCollum, Laila Akhlaghi, Helena Walkowiak, Chinwe Owunna, Hella Witt, Francis Aboagye-Nyame

Printed: August 2005



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This report was made possible through support provided by the U.S. Agency for International Development, under the terms of cooperative agreement number HRN-A-00-00-00016-00. The opinions expressed herein are those of the author(s) and do not necessarily reflect the views of the U.S. Agency for International Development.

About RPM Plus

RPM Plus works in more than 20 developing and transitional countries to provide technical assistance to strengthen pharmaceutical and health commodity management systems. The program offers technical guidance and assists in strategy development and program implementation both in improving the availability of health commodities—pharmaceuticals, vaccines, supplies, and basic medical equipment—of assured quality for maternal and child health, HIV/AIDS, infectious diseases, and family planning and in promoting the appropriate use of health commodities in the public and private sectors.

Recommended Citation

Jennifer McCollum, Laila Akhlaghi. 2005 *Trip Report: Improving Quantification of ARVs Workshop Windhoek, Namibia 19-22 July, 2005.* Submitted to the U.S. Agency for International Development by the Rational Pharmaceutical Management Plus Program. Arlington, VA: Management Sciences for Health.

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ACRONYMS

ART Anti-Retroviral Therapy

ARV Anti-Retroviral

CAMERWA Centrale d'Achats des Médicaments Essentials (Central Medical Stores)

Rwanda

HAPCO HIV AIDS Prevention and Control Office [Ethiopia]
MEDS Mission for Essential Drugs & Supplies [Kenya]
MSF Médecins Sans Frontiers (Doctors without Borders)

MSH Management Sciences for Health

MOH Ministry of Health
OI opportunistic infection

PASS Pharmaceutical Administration and Supply Services [Ethiopia]

PEP post-exposure prophylaxis

PMIS pharmaceutical management information system
PMTCT prevention of mother to child transmission [of HIV]

PSP Pharmacie de Santé Publique Cote d'Ivoire
RPM Plus Rational Pharmaceutical Management Plus
TRAC Training and Research AIDS Center [Rwanda]
USAID U.S. Agency for International Development

WHO World Health Organization

ZPCT Zambia Primary Care and Treatment Project [Zambia]

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BACKGROUND

In March 2005, Management Sciences for Health (MSH) Rational Pharmaceutical Management Plus Program (RPM Plus) organized a regional technical workshop in Nairobi, Kenya for its technical field staff as a result of ongoing discussions concerning the growing demand for technical assistance in pharmaceutical management information system (MIS) strengthening and quantification in the countries supported by RPM Plus under the United States President's Emergency Plan for AIDS Relief.

Two to three representatives from each of the RPM Plus supported countries (Ethiopia, Kenya, Haiti, Namibia, Rwanda, South Africa, and Zambia) participated in the workshop (the RPM Plus country team lead and the PMIS and quantification focal persons) in addition to several people from RPM Plus headquarters. During the workshop, a systematic and standard approach for RPM Plus technical assistance in PMIS and quantification for RPM Plus-supported ART programs was established. A general overview of quantification and more specifically, training on the RPM Plus quantification tool, Quantimed was also provided to participants.

During this workshop, it was agreed that training in quantification for ART programs should be extended to government counterparts to further develop national-level capacity in countries. As a result, RPM Plus set a target date of late July 2005 for a regional quantification and Quantimed training where government officials working in quantification and procurement would be invited to attend.

RPM Plus field staff in Ethiopia, Kenya, Rwanda, Namibia, Haiti and Zambia worked with their respective Ministries of Health to identify workshop participants based on their job responsibilities. Following MOH recommendations, RPM Plus supported the selected candidates to attend the workshop in Windhoek, Namibia from July 19-22, 2005.

Purpose of Trip

Jennifer McCollum, Laila Aklaighi, Helena Walkowiak, Hella Witt, Chinwe Owunna and Francis Aboagye-Nyame traveled to Windhoek to facilitate the *Workshop for Improved Quantification of AntiRetrovirals (ARVs)* which was organized with support from the U.S. President's Emergency Plan for AIDS Relief administered through the U.S. Agency for International Development (USAID).

Scope of Work

- Provide the opportunity for participants to interact with each other, sharing experiences, lessons learned in different approaches to data collection, quantification and other related issues affecting procurement of ARVs
- Train participants in quantification of ARVs: methodology, considerations and assumptions and practice
- Introduce and provide hands-on training in Quantimed, a tool for national-level quantification developed by RPM Plus

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ACTIVITIES

The Workshop took place at the Windhoek Country Club Resort located in Windhoek, Namibia from Tuesday, 19 July to Friday, 22 July, 2005. Transport to Namibia, accommodations and per diem for the week were funded by the U.S. President's Emergency Plan in each country. Breakfast and lunch were also included in the room and conference package.

Government officials responsible for quantifying ARVs for national procurements in Cote D'Ivoire, Kenya, Ethiopia, Rwanda, Zambia, and Namibia were in attendance. They were also accompanied by their respective RPM Plus country representative working with them in quantification. Simultaneous French/English translation was provided to allow attendance and participation from French speaking participants.

Participants

- 1. Patrice Kacou, Pharmacist PSP, Cote d'Ivoire
- 2. Eric Coulibaly, Pharmacist PSP, Cote d'Ivoire
- 3. Denise Murekatete, TRAC Pharmacist, Rwanda
- 4. Aline Mukerabirobi, CAMERWA, Rwanda
- 5. Antoine Gatera, Senior Technical Advisor, MSH/RPM Plus, Rwanda
- 6. Cecilia Muiva, MOH Pharmacist, Kenya
- 7. Patrick Wambua, MOH Pharmacist, Kenya
- 8. Ruth Njoroge, Procurement & Distribution, MEDS, Kenya
- 9. Joseph Mukoko, Senior Program Associate, MSH/RPM Plus
- 10. Michael Thuo, Senior Technical Advisor MSH/RPM Plus, Kenya
- 11. Caroline Yeta, CBoH Pharmacy Specialist, Zambia
- 12. Albert Lupupa, CBoH Pharmacy Specialist, Zambia
- 13. Oliver Hazemba, Regional Technical Advisor MSH/RPM Plus, Zambia
- 14. Gail Bryan, Senior Advisor MSH/ZPCT, Zambia
- 15. Mumbi Musonda, Technical Officer, MSH/ZPCT, Zambia
- 16. Habtamu Tesfaye, MOH Pharmacist, Ethiopia
- 17. Edmealem Ejigu, Senior Pharmacist, HAPCO-Global Fund Procurement Officer Ethiopia
- 18. Yohannes Mesfin, Team Leader of Supplies, PASS, Ethiopia
- 19. Shimelis Endailalu, Pharmacist, MSH/RPM Plus, Ethiopia
- 20. Greatjoy Mazibuku, Hospital Pharmacist ART Pharmacy at Oshakati Hospital, Namibia
- 21. Gwendoline Tenga, Hospital Pharmacist ART Pharmacy at Katutura Hospital, Namibia
- 22. Chaka Mano, Hospital Pharmacist ART Pharmacy at Rundu Hospital, Namibia
- 23. Harriet Lema, Procurement Pharmacist, CMS Namibia
- 24. Dawn Pereko, Senior Program Associate, MSH/RPM Plus Namibia

Agenda and Sessions

(The workshop agenda is attached as annex 1.)

Day 1:

The first day of training began with introductions of participants and trainers and a discussion on their experience, challenges and expectations from the workshop. All participants were given latest editions of the WHO list of pre-qualified ARV suppliers and *Untangling the Web of Price Reductions*, 8th edition, July 2005, an MSF pricing guide for the purchase of ARVs for developing countries.

The first session of the day introduced the concept of quantification, definitions of terms used and HIV/AIDS pharmaceuticals were identified. An example of coordination efforts for HIV/AIDS quantification in Kenya was also shared.

In Session 2 "Basic Concepts of Antiretroviral Therapy for Quantification," basic rules for appropriate ART combinations and WHO recommended first-line and second-line ART were presented. An example of 32 regimens used in one country was given in a group exercise for participants to identify recommended WHO regimens and sub-optimal use of ARVs.

In Session 3 "Quantification Methods and Exercises," four different methods of quantification were introduced. Participants were given two exercises on the two most common methods of quantification, morbidity and consumption to complete on their own.

In Session 4 "The Antiretroviral Drug Market and Quantification," participants were introduced to international market forces that impact the supply and demand of ARVs in resources-limited settings. Emphasis was placed on the importance of accurate and timely quantification to ensure continuing ARV supply.

After the day's presentations, participants were invited to an Opening Dinner held in the hotel conference center. Representatives from the Ministry of Health and USAID Namibia were also in attendance.

Day 2:

During Session 5 "Issues in Quantifying Needs of ARVs and OI Medicines," participants were divided in to groups and asked to identify and discuss issues that affect the quantification of ARVs and medicines to prevent and treat opportunistic infections (OIs). The issues were organized into areas related to the product, treatment, programmatic or service delivery and lastly supply. After each group had presented their issues, a summary presentation was made on all issues.

In Session 6 "Quantifying Antiretroviral Needs for Children," participants reviewed pediatric issues organized into areas related to the product, treatment, programmatic or service delivery and supply. Methodological issues for paediatric ART quantification were also discussed.

In Session 7 "Data Collection for ARV Quantification," typical data needs and potential sources for quantifying for ARVs in ART, prevention of mother to child transmission (PMTCT) and post-exposure prophylaxis (PEP) use were listed and described. Data collection steps, mechanisms/tools and coordination were also discussed.

Session 8 "Assumptions and Decision Making: The Art of Quantification," presented basic principles and approaches to making assumptions when quantifying needs for ART programs. Examples of assumptions made at program or national situations were described. Emphasis was placed on coordination, team work and cross-checking.

Session 9 "Process and Approach for ARV Medicines Quantification" introduced the audience to one approach of quantifying needs for ARVs. The calculation steps for quantifying ARV needs for ART, PMTCT and PEP were described. The steps for the quantification process, including the preparatory phase were also discussed.

Day 3 and 4:

The Quantimed tool was introduced at the beginning of Day 3. Participants worked on individual computers in order to gain hands-on learning experience using the tool. Participants were first asked to install Quantimed and the information available on the Quantimed CD was reviewed. Participants were made aware of the application of the tool, how to navigate in Quantimed and how morbidity data is organized within the tool.

A case study with sample data representing a country program quantifying ARV needs was then reviewed with participants. Decisions and assumption were made on how to proceed with the quantification of ARVs in each situation. Participants then began to enter the data required into Quantimed, step by step, following the presenter. A team of experienced Quantimed users were available to assist participants. Tips and technical issues were also discussed on Day 4 after participants had some familiarity with the tool. The process for providing ongoing technical support and addressing problems with Quantimed was outlined.

At the end of Day 3, participants attended a Namibian cultural night on the University campus. Authentic Namibian cuisine was catered and live music was arranged.

At the conclusion of the workshop, evaluations were collected from participants.

Collaborators and Partners

- Ms. Dinah Tjiho, Deputy Director, Drug Control, Ministry of Health, Namibia
- Mr. Johannes Gaeseb, Acting Deputy Director, Pharmaceutical Services, Ministry of Health, Namibia
- Ms. Shiimi Lahya, USAID

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NEXT STEPS

Immediate Follow-up Activities

An email distribution list of all participants was sent out to participants and facilitators on August 27, 2005 in an effort to encourage participants to stay in contact with each other and continue to exchange experiences and strategies for data collection, quantification and procurement.

An analysis of the workshop evaluations was performed and reviewed. Comments and suggestions will be incorporated into subsequent trainings. See Annex 2.

RPM Plus country programs will continue to provide ongoing support to their country counterparts in quantification and in using Quantimed.

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ANNEX 1: AGENDA

Day 1, Tuesday, July 19th:

| Time | Session | Presented By | |
|-------------|---|-------------------|--|
| 8:30:9:15 | Course Introduction | Michael and Kofi | |
| 9:15-11:00 | Introduction to Quantification | Helena and Joseph | |
| 11:00-11:15 | Coffee Break | | |
| 11:15-11:45 | Basic Concepts of Antiretroviral Therapy for Mumbi Quantification | | |
| 11:45-1:00 | Quantification Methods and Exercises Hella | | |
| 1:00-2:00 | Lunch | | |
| 2:00-2:45 | Continuation of Session 3 Hella | | |
| 2:45-3:30 | The Antiretroviral Drug Market and Quantification Helena | | |
| 3:30-3:15 | Coffee Break | | |
| 3:15-5:00 | Issues in Quantifying Needs of ARVs and OI Medicines Helena and Mumbi | | |
| 6:30 - 8:30 | Opening Dinner | | |

Day 2, Wednesday, July 20th:

| 9:00-10:00 | Quantifying Antiretroviral Needs for Children Laila | |
|-------------|---|--|
| 10:00-10:15 | Coffee break | |
| 10:15-12:30 | Data Collection for ARV Quantification Joseph | |
| 12:30-1:30 | Lunch | |
| 1:30-2:45 | Assumptions and Decision Making: The Art of Quantification Laila | |
| 2:45-3:00 | Coffee Break | |
| 3:00-4:30 | Process and Approach to Antiretroviral Drug Quantification Chinwe | |

Day 3, Thursday, July 21st:

| 8:30-9:30 | Introduction to Quantimed Laila | |
|-------------|--|--|
| 9:30-1:00 | Quantimed Group Exercise 1 Laila assisted by RPM Plus team | |
| 1:00-2:00 | Lunch | |
| 1:00-5:00 | Continuation of Session 11 Laila assisted b | |
| 6:30 - 9:00 | Namibian Dinner and Dancing | |

Day 4, Friday, July 22nd:

| 8:30-1:00 | Quantimed Group Exercise 2 | Laila assisted by RPM Plus team |
|-----------|----------------------------|------------------------------------|
| 1:00-2:00 | Lunch | |
| 1:30-2:00 | Quantimed Tips | Laila |
| | | Laila assisted by RPM Plus team |
| 4:30-5:00 | Review of expectations | Michael and Kofi |

RPM Plus team: Chinwe, Helena, Hella

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| Question | Rating | Comments |
| A. Overall rating of the | he course: | |
| 1. How would you rate your overall satisfaction with the course? | Poor Excellent 1 2 3 4 5 | Average= 4.17 Good but rushed |
| 2. How effective was the overall format of issues-based sessions, case studies, exercises and discussions? Please elaborate on your response: | Poor Excellent 1 2 3 4 5 | Average = 4.00 We need more cases and time to share solutions for exercises Quantimed need more time The flow was excellent Very effective and interactive sessions, the practicals made us remember the process better Participatory Method used was well received |
| 3. How would you rate the materials for this course (handouts, slides, supplementary references)? Please elaborate on your response: Rating of individual s | Poor Excellent 1 2 3 4 5 | Average = 4.18 Can be used as reference materials Very informative and elaborative |
| | | T., 400 |
| 1. Introduction | Poor Excellent 1 2 3 4 5 | Average = 4.09 |
| 2. Basic Concepts of Antiretroviral Therapy for Quantification | Poor Excellent 1 2 3 4 5 | Average = 3.90 Needed to look at more key issues effecting procurement e.g. local registration of ARVs |
| 3. Quantification Methods and Exercises | Poor Excellent 1 2 3 4 5 | Average = 4.00 Limited by time – it took people time to understand the formulas |
| 4. The Antiretroviral Drug Market and Quantification | Poor Excellent 1 2 3 4 5 | Average = 4.45 This is a vital part of the ARV quantification as it seems to be very dynamic need to be abreast all the time |
| 5. Issues in Quantifying Needs of ARVs and OI Medicines | Poor Excellent 1 2 3 4 5 | Average = 4.11 Very helpful, hope to apply the lessons learnt |

| Antiretroviral Needs | | | | | | Look into issue of Large Bottles (500ml or |
|--|------|------|--------|--------|-----------------------|--|
| for Children | Poor | | | Excell | ent | more) |
| | 1 | 2 | 3 | 4 | 5 | More examples on pediatrics ART needed |
| | | | | | | since it is a new area for most people |
| | | | | | | It is better to add clinical therapeutics |
| 7. Data Collection for | Poor | | | Excell | ent | Average = 4.00 |
| ARV Quantification | 1 | 2 | 3 | 4 | 5 | Kenya was good example |
| 8. Assumptions and | Poor | | | Excell | lont | Average = 3.91 |
| Decision Making: The | 1 | 2 | 3 | 4 | eni 5 | |
| Art of Quantification | 1 | 2 | 3 | | 5 | |
| 9. Process and | | | | | | Average = 3.50 |
| Approach to | Poor | | | Excell | ent | Inadequate time to illustrate examples |
| Antiretroviral Drug | 1 | 2 | 3 | 4 | 5 | Need more time to explain the theory |
| Quantification | | | | | | |
| 10. Introduction to | | Poor | | | Average = 4.27 | |
| Quantimed | | | xcelle | | | |
| | 1 | 2 | | 3 | 4 | |
| | | | 5 | | | |
| 11. Quantimed Group | Poor | | | Excell | | Average = 4.18 |
| Exercise 1 | 1 | 2 | 3 | 4 | 5 | |
| 12. Quantimed Group | Poor | | | Excell | ent | Average = 4.10 |
| Exercise 2 | 1 | 2 | 3 | 4 | 5 | |
| 13. Quantimed Tips | Poor | | | Excell | ent | Average = 4.27 |
| _ | 1 | 2 | 3 | 4 | 5 | _ |
| B. Comments: More time needed on quantification exercises and Quantimed | | | | | | |

| 1. To what extent has |
|------------------------|
| the course added to |
| your knowledge of the |
| need to address |
| quantification of ARVs |
| in support of |
| HIV/AIDS programs? |
| |

In depth knowledge on use of Quantimed in analyzing consumption data which I am using at the facility

I am a member of team quantification; this course adds knowledge about Quantimed. This tool will help me quantify the ARVs, kits and Consumables in HIV/AIDS programs

Appreciate the facility level (where I work) needs to collect and report conscientious data for National level

I was always very scared of quantification but now I have adequate skills to do it.

A great extant because I can quantify for the nation easily and accurately or at province level and able to reinforce coordination back in my country Large extent highlighting the issues of complexity with set regimens quantifications

It has really been helpful as we have had major problems in this area. Hopefully we can setup up a data in Quantimed and quantify better for our country, we really needed this tool. Thanks!

To use a reliable tool - Quantimed

Learned from other country experiences

Give me time to internalize it and I will send an email

| course demonstrated | G000 - I |
|--------------------------|--|
| the general approach to | On a scale – 80% |
| quantifying ARVs? | Very Well and practical (2) |
| quality ing 1111 (5) | Well demonstrated |
| 3. How well has this | Excellent |
| course demonstrated | Need more time |
| the process quantifying | On a scale – 80% |
| ARVs using | Good (2) |
| Quantimed? | Very Well, but there is need for more time to have hands on experience |
| Quantimeu: | with Q. |
| | Needs more practice to appreciate it (2) |
| | ** ** |
| 4. What, if anything, | No |
| would you change | No, topics are enough but need more exercises |
| about this course? Are | More on tips |
| there any additional | Suggest more time so that there is room for individual exercises |
| | More practical examples especially when describing the consumption and |
| topics you would like to | morbidity based quantity methods |
| see covered? | Helena's workshop (Zambia!!) is very helpful in understanding the |
| | concepts of quantification for ART, so I would suggest it be included in |
| | this training |
| | More Hands on Experience |
| | Add a visit to Collect Data |
| | Add more time especially for the practical sessions |
| 5. List three aspects of | Consumption Based method of Quantification (2) |
| this course that you | Quantimed (3) |
| might address in your | Assumptions and Considerations in Quantification |
| · · | Morbidity Assumption |
| professional capacity: | Quantification Process/Method (3) |
| | Quantification needs for Children (ARV) |
| | Assumption and Decision Making in Quantification |
| | Data Collection for ARV Quantification (3) |
| | Multiple site (facility) quantifications |
| | Organizing data & applying to Quantimed |
| | Assumptions especially with lack of accurate data |
| | Quantification of other HIV/AIDS commodities other than ARVs |
| | Training of other staff on how to use Quantimed |

| recommend this course | | medicines | | |
|-----------------------|--|---|--|--|
| to your professional | | Things would be more professionally done | | |
| colleagues? Please | | and patients well looked after | | |
| | | We made lost of mistakes in quantification | | |
| elaborate on your | | even in non-ARVs, and it would be nice for | | |
| response: | Yes – (9) | my colleagues to go through this | | |
| | No | All involved in Quantifying especially for | | |
| | | National, regional or district need to attend | | |
| | | It would make easier to explain to people, the | | |
| | | art of quantification and what it takes to make | | |
| | | a good national quantification | | |
| | | This course is needed by many pharmacists at | | |
| | | this current time of ARV scale-up | | |
| Any other comments: | Thanks for this brilliant course a program like Quantimed The program left little room to tour Namibia; it would be good to give | | | |
| | | | | |
| | people a whole free afternoon so the people can get to appreciate their | | | |
| | surroundings. | | | |
| | Nice venue, well arranged workshop given time constraints in organizing | | | |
| | Course should be done in 7 days to give participants ample time to do and | | | |
| | appreciate exercises | | | |
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ANNEX 3: LETTER OF INVITATION



<<Date>>

<<Name of invitee>>

<<Title>>

<< Name of Office/Department>>

<<Address>>

<<Address>>

Dear << Name of invitee>>:

It is my pleasure to invite you to participate in a 4-day **Workshop for Improved Quantification of Anti-Retrovirals** (**ARVs**) organized by Management Sciences for Health Rational Pharmaceutical Management (RPM) Plus Program with support from the U.S. President's Emergency Plan for AIDS Relief administered through the U.S. Agency for International Development. The Workshop will be held July 19-22, 2005 at the Windhoek Country Club in Windhoek, Namibia.

The Workshop is designed to provide practical training in the quantification of ARVs. Government officials responsible for quantifying ARVs for National HIV/AIDS Programs in Cote D'Ivoire, Kenya, Ethiopia, Rwanda, Zambia, S. Africa, Namibia, and Haiti have been invited to attend. We will be discussing the methodology behind quantification in addition to the necessary considerations and assumptions required in quantifying ARVs. You will also be introduced to *Quantimed*, a software program developed by RPM Plus to assist in the quantification of ARVs at the national level.

If you are able to participate, the RPM Plus Program will cover your expenses. To coordinate your travel and accommodations, please contact << RPM Plus contact in-country>>, << position/title>> with the RPM Plus << Country>> office in << city>> by telephone << RPM Plus phone in-country>> or by e-mail << RPM Plus in-country contact email address>>.

I look forward to a positive response.

Sincerely,

<< Name, RPM Plus country team leader >>
<< Position >>
Rational Pharmaceutical Management (RPM) Plus Program
Management Sciences for Health





| Trip Report: Improving Quantification of ARVs Wor | kshop, Windhoek, Namibia, 19- | 22 July, 2005 |
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ANNEX 4: REQUEST FOR COUNTRY CLEARANCE

Request for Country Clearance

TO: Kirk Lazell, Team Leader SO#5, USAID/Namibia

Cathy Thompson, Deputy Director HIV/AIDS Officer

Shiimi Lahya, Senior HIV/AIDS Specialist, USAID/Namibia Renee Liebenberg, Administrative Assistant, USAID/Namibia

FROM: Management Sciences for Health (MSH)/Rational Pharmaceutical Management

Plus (RPM Plus) Program, Cooperative Agreement # HRN-A-00-00-00016-00

SUBJECT: Request for Country Clearance for travel to Namibia for Regional Quantification

Workshop.

COPY: Anthony Boni/Global HPSR/CTO RPM Plus

Kama Garrison, USAID/GH/HIDB/HSD Douglas Keene, Director, MSH/RPM Plus

Maria Miralles, Deputy Director, MSH/RPM Plus Michael Gabra, Project Manager/AFR, MSH/RPM Plus Jude Nwokike, Senior Program Associate MSH/RPM Plus

Francis Aboagye-Nyame, Senior Program Associate MSH/RPM Plus

- 1. The RPM Project wishes to request country clearance for proposed travel to Namibia by the following personnel to attend the Regional Quantification Workshop from July 19 22, 2005
 - Patrice Kacou, Pharmacist PSP, Cote D'Ivoire
 - Eric Coulibaly, Pharmacist PSP, Cote D'Ivoire
 - Donald François, MOH, Haiti
 - Denise Murekatete, TRAC Pharmacist, Rwanda
 - Aline Mukerabirobi, CAMERWA, Rwanda
 - Philomene Uwayisaba, DOP Pharmcist, Rwanda
 - Antoine Gatera, Senior Technical Advisor MSH/RPM Plus, Rwanda
 - Felix Hitayezu, Senior Program Associate MSH/RPM Plus, Rwanda
 - Cecilia Muiva, MOH Pharmacist, Kenya
 - Patrick Wambua, MOH Pharmacist, Kenya
 - Ruth Njoroge, Procurement & Distribution, MEDS, Kenya
 - Joseph Mukoko, Senior Program Associate, MSH/RPM Plus
 - Michael Thuo, Senior Technical Advisor MSH/RPM Plus, Kenya
 - Caroline Yeta, CBoH Pharmacy Specialist, Zambia
 - Albert Lupupa, CBoH Pharmacy Specialist, Zambia
 - Oliver Hazemba, Regional Technical Advisor MSH/RPM Plus, Zambia
 - Gail Bryan, Senior Advisor MSH/PCT, Zambia
 - Mumbi Musonda, Technical Officer ARVs MSH/ZPCT, Zambia
 - Alemayehu Lemma, Head PASS, Ethiopia

- Edmealem Ejigu, Senior Pharmacist, Ethiopia
- Yohannes Mesfin, Team Leader of Supplies PASS, Ethiopia
- Negussu Mekonnen, Senior Technical Advisor, MSH/RPM Plus, Ethiopia
- Laila Akhlaghi, Senior Program Associate, MSH/RPM Plus
- Hella Witt, Senior Program Associate, MSH/RPM Plus
- Chinwe Owunna, Program Associate, MSH/RPM Plus
- Helena Walkowiak, Senior Program Associate, MSH/RPM Plus
- Jennifer McCollum, Program Associate, MSH/RPM Plus

2. Background:

The Workshop for Improved Quantification of AntiRetrovirals (ARVs) organized by Management Sciences for Health (MSH) / Rational Pharmaceutical Management Plus Program (RPM Plus) with support from the U.S. President's Emergency Plan for AIDS Relief administered through the U.S. Agency for International Development will be held July 19-22, 2005.

The Workshop is designed to provide practical training in the quantification of ARVs. Government officials responsible for quantifying ARVs for National HIV/AIDS Programs in Cote D'Ivoire, Kenya, Ethiopia, Rwanda, Zambia, S. Africa, Namibia, and Haiti have been invited to attend. RPM Plus will be discussing the methodology behind quantification in addition to the necessary considerations and assumptions required in quantifying ARVs. Participants will also be introduced to *Quantimed*, a software program developed by RPM Plus to assist in the quantification of ARVs at the national level.

3. Purpose of Proposed Visit:

All participants are traveling to Namibia to attend, participate and a few may facilitate the sessions at the Workshop for Improved Quantification of ARVs from July 19 - 22, 2005 at the Windhoek Country Club in Namibia.

4. Scope of Participants during this visit:

- Interact with participants from other MOHs, sharing experiences, lessons learned in different approaches to ARV quantification at the national level
- Training in quantification of ARVs: methodology, considerations & assumptions and practice
- Introduction to Quantimed, a tool for national-level quantification developed by RPM Plus
- Brief and/or debrief USAID officials, as requested.

- 5. Anticipated Contacts:
 - a. USAID/Namibia Mission
 - b. Members of the MOH
 - c. Other stakeholders such as CDC, FHI if required
- 6. Logistics:

While in Namibia Participants will be staying at the Windhoek Country Club.

- 7. Funding: RPM Plus Cote D'Ivoire, RPM Plus Haiti, RPM Plus Rwanda, RPM Plus Kenya, REDSO, RPM Plus Zambia, MSH-ZPCT Zambia, RPM Plus Ethiopia Emergency Plan funds, RPM Plus Common Agenda Funds.
- 8. Action: Please advise of country clearance for the participants. Please confirm receipt of this e-mail, and reply via e-mail to the attention of Anthony Boni, USAID/G/PHN/HN/HPSR, e-mail address: aboni@usaid.gov, tel (202) 712-4789, fax (202) 216-3702. Please send carbon copies to Kama Garrison at kgarrison@usaid.gov, Douglas Keene at dkeene@msh.org, Maria Miralles at mmiralles@msh.org, Michael Gabra at mgabra@msh.org, Francis Aboagye-Nyame at fnyame@msh.org, Jude Nwokike at jnwokike@msh.org. and Charles Brimmer at cbrimmer@msh.org.

No further Mission assistance is required from USAID/Namibia for the arrival of the participants.

Thank you for Mission cooperation.

| Trip Report: Improving Quantification of ARVs Wor | kshop, Windhoek, Namibia, 19- | 22 July, 2005 |
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ANNEX 5: REQUEST FOR VISA TEMPLATE LETTER

Management Sciences for Health, Inc. 4301 N. Fairfax Drive, Suite 400 Arlington, VA 22203-1627 USA

[Date]

Embassy of the Republic of Namibia Attn: Visa Section [City, Country]

Dear Consular Officer:

I am respectfully requesting a single entry business visa on behalf of [Name], a citizen of [Country]. During [his/her] time in the Republic of Namibia, [he/she] will attend the Workshop for Improving the Quantification of Antiretrovirals (ARVs) sponsored by Management Sciences for Health/ Rational Pharmaceutical Management Plus scheduled from July 19-22, 2005.

The Workshop is designed to provide practical training in the quantification of ARVs. The main objectives of the meeting will be to discuss the methodology behind quantification in addition to the necessary considerations and assumptions required in quantifying ARVs, and be introduced to *Quantimed*, a software program developed by RPM Plus to assist in the quantification of ARVs at the national level.

While in Namibia, [Name] can be reached at:

Management Sciences for Health Office 3G, Yang Tse Plaza 351 Sam Nujoma Klein Windhoek, Namibia Tel: 264-61-228016/228616

MSH assumes financial responsibility for [Name] during [his/her] stay in the Republic of Namibia and guarantees his onward travel.

Thank you for your assistance in expediting this visa.

Sincerely,

Jane Andelman

Jane Andelman
Travel Coordinator
Management Sciences for Health

| rip Report: Improving Quantification of ARVs Workshop, Windhoek, Namibia, 19-22 July, 2005 | |
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ANNEX 6: TRAVEL INFORMATION FOR NAMIBIA

TRAVEL ADVISORY FOR PARTICIPANTS OF ARV Quantification Workshop, Windhoek Country Club and Resorts, Windhoek, Namibia July 19-22, 2005

We are pleased that you will be attending the ARV Quantification Workshop from July 19-22, 2005, and we look forward to your arrival. Below is some general information that will guide you and make your trip as comfortable as possible.

> Preparing your travel itinerary: The workshop starts at 07:30 on Tuesday, July 19 with registration. Also note that there will be an opening dinner on same day, July 19, 05 at 19h00. All participants are invited to the opening dinner, where they will meet and socialize with officials from the Ministry of Health and other partner organizations.

On Thursday, July 21, 2005 there will be a social evening where participants will be entertained by a local band while enjoying a local cuisine.



Visas: If you are a foreign national, you need a visa to enter Namibia. All participants should contact the Namibian consulate/embassy in their countries to obtain their visas. Although some nationals are exempted from obtaining Tourist Visas, Business visas are mandatory for everyone.



At Hosea Kutako International Airport: A shuttle company will pick you up from the airport to the Windhoek Country Club at times specified on your itinerary.

Windhoek P.O. Box Windhoek Tel: +264-

Fax: +264-

E-mail:



Country Club 30777

61-2055911 61-205511

hrwccr@legacyhotels.co.za



Transport services: For those who want to visit town after hours, we have done some negotiations with a shuttle company to give our participants some discounted fares. A single fare per person is N\$40 but if you travel in a group of up to four people at a time, the fare will be N\$10 per person.



Emergency Numbers: Ruusa – 264(0)811 22 93 11 and Dawn 264 (0)81 29347545 80 are the people to call in case of any problem. Please let us know of any delays in arrival. This will not only enable us to reschedule your pick up time, but also to keep the hotel informed of your arrival

Other Useful Numbers: Police: 10111; Ambulance: 911; International SOS Namibia: 230505





<u>Weather and clothing</u>: The weather in Namibia in July is quite cold. Bring along warm clothing. Business Casual clothes are needed for the opening dinner. Casual wear is accepted for the sessions of the course.

<u>Health</u>: Malaria is endemic to most parts of Namibia. Although Windhoek is not in the Malaria risk area, visitors are advised to start taking anti-malarial tablets before departure and continue taking them for the prescribed time after their return.

Participants are responsible for their own travel insurance.

<u>Currency:</u> PLEASE NOTE Namibian Dollars are not available outside Namibia but the South African Rand is legal tender and is therefore acceptable at every retail shop in Namibia. US Dollars and Sterling Pounds are most acceptable and can be exchanged at banks/forex bureau and hotels with least delay. Major credit cards are commonly accepted.

<u>Safety:</u> Normal precautions as in any other destination worldwide should be taken. Visitors are advised not to leave cash and valuables in their hotel rooms but to make use of safe deposit boxes and safes. One should never carry large sums in cash.



<u>What else to prepare</u>: All country groups are reminded to bring with them copies of their **National** STG for HIV/AIDS as well as STGs for Malaria and TB. Each participant should also have a calculator for these sessions. These will be used in the final exercises applying country specific data.

Be relaxed and confident, we will arrange the small things... and the not-so-small things... as much as possible....

We will try to make your stay a comfortable one. Have a pleasant and intellectual trip, and we look forward to welcoming you to Namibia.